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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	_ Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.		government-issued ure identification (for mple, your driver's	Iyanna First name C Middle name	First name
		g your picture tification to your	Harris Lincoln Last name and Suffix (Sr., Jr., II, III)	Middle name Last name and Suffix (Sr., Jr., II, III)
2.		other names you have d in the last 8 years	FKA Iyanna C Lincoln	
		de your married or den names.		
3.	youi num Indi	y the last 4 digits of r Social Security ber or federal vidual Taxpayer tification number	xxx-xx-6587	

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Case number (if known)

Debtor 1 Iyanna C Harris Lincoln

4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
		■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.		
	Include trade names and doing business as names	Business name(s)	Business name(s)		
		EINs	EINs		
5.	Where you live		If Debtor 2 lives at a different address:		
		4740 S. Woodlawn, Ave, Apt 2B Chicago, IL 60615			
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		Cook			
		County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
ò.	Why you are choosing	Check one:	Check one:		
bankruptcy		Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

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Debtor 1 Iyanna C Harris Lincoln

Case number (if known)

7.	The chapter of the Bankruptcy Code you are choosing to file under					y 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy		
	choosing to file under		,,	go to the top of	page 1 and check the appropri	ate box.		
		C	■ Chapter 7					
		□ с	hapter 11					
		□ с	hapter 12					
		□ с	hapter 13					
8.	How you will pay the fee		about how yo	u may pay. Typ attorney is subr	ically, if you are paying the fee	eck with the clerk's office in your local court for more details yourself, you may pay with cash, cashier's check, or mone half, your attorney may pay with a credit card or check with		
					tallments. If you choose this ops (Official Form 103A).	tion, sign and attach the Application for Individuals to Pay		
			I request tha	t my fee be wa	ived (You may request this opt	ion only if you are filing for Chapter 7. By law, a judge may,		
			but is not requapplies to you	uired to, waive y ur family size an	your fee, and may do so only if you are unable to pay the fee	your income is less than 150% of the official poverty line the in installments). If you choose this option, you must fill out fficial Form 103B) and file it with your petition.		
9.	Have you filed for bankruptcy within the	■ No).					
	last 8 years?	☐ Ye	es.					
			District		When	Case number		
			District		When	Case number		
			District		When	Case number		
10.	Are any bankruptcy	■ No)					
	cases pending or being filed by a spouse who is not filing this case with	□Ye						
	you, or by a business partner, or by an affiliate?							
			Debtor			Relationship to you		
			District		When	Case number, if known		
			Debtor			Relationship to you		
			District		When	Case number, if known		
11.	Do you rent your residence?	■ No	No. Go to line 12.					
	residence?	□Ye	es. Has yo	ur landlord obta	nined an eviction judgment agai	nst you?		
				No. Go to line	12.			
				Yes. Fill out Inithis bankruptcy		n Judgment Against You (Form 101A) and file it as part of		

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		Document	Page 4 01 50	
Debtor 1	Ivanna C Harris Lincoln		J	Case number (if known)

Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of **Bankruptcy Code and are** operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ☐ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any No. property that poses or is ☐ Yes. alleged to pose a threat of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs needed, why is it needed? immediate attention? For example, do you own perishable goods, or livestock that must be fed, Where is the property? or a building that needs urgent repairs? Number, Street, City, State & Zip Code

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Debtor 1 Iyanna C Harris Lincoln

Case number (if known)

15. Tell the court whether you have received a briefing about credit

counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

Explain Your Efforts to Receive a Briefing About Credit Counseling

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 □ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Document Page 6 of 56 Case number (if known) Debtor 1 Iyanna C Harris Lincoln Part 6: **Answer These Questions for Reporting Purposes** Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16. What kind of debts do 16a. individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under □ No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5**0,001-100,000 **5001-10,000** □ 50-99 owe? **1**0,001-25,000 ☐ More than 100,000 □ 100-199 □ 200-999 19. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion ■ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Iyanna C Harris Lincoln Signature of Debtor 2 Iyanna C Harris Lincoln Signature of Debtor 1

Executed on

MM / DD / YYYY

May 15, 2018 MM / DD / YYYY

Executed on

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Debtor 1 Iyanna C Harris Lincoln

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ David Gallagher	Date	May 15, 2018
Signature of Attorney for Debtor		MM / DD / YYYY
David Gallagher		
Printed name		
Upright Law LLC		
Firm name		
79 West Monroe		
Fifith Floor		
Chicago, IL 60603		
Number, Street, City, State & ZIP Code		
Contact phone 312-546-4264	Email address	dgallagher@uprightlaw.com
6295024 IL		
Dar number 9 State		

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		Docume	nt Page 8 of 56	
Fill in this infor	mation to identify your	case:		
Debtor 1	Iyanna C Harris L	incoln		
	First Name	Middle Name	Last Name	_
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	_
United States B	ankruptcy Court for the:	NORTHERN DISTRICT (DF ILLINOIS	_
Case number				

☐ Check if this is an amended filing

12/15

Official Form 106Sum

(if known)

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

		ssets
	Value of	f what you own
Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$	5,639.00
1c. Copy line 63, Total of all property on Schedule A/B	\$	5,639.00
2: Summarize Your Liabilities		
		abilities t you owe
Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	65,511.65
Your total liabilities	\$	65,511.65
3: Summarize Your Income and Expenses		
Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,421.88
Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,359.00
4: Answer These Questions for Administrative and Statistical Records		
Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your	other sch	iedules.
■ Yes What kind of debt do you have?		
	1b. Copy line 62, Total personal property, from Schedule A/B	1b. Copy line 62, Total personal property, from Schedule A/B

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 Ú.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

the court with your other schedules.

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From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

2,249.75 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on <i>Schedule E/F</i> , copy the following:	Total	claim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	48,494.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	48,494.00

Case 18-14120 Doc 1 Filed 05/15/18 Entered 05/15/18 14:02:20 Desc Main Page 10 of 56 Document Fill in this information to identify your case and this filing: Debtor 1 Iyanna C Harris Lincoln Middle Name First Name Last Name Debtor 2 Middle Name First Name Last Name (Spouse, if filing) United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. ☐ Yes. Where is the property? Part 2: Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put Toyota Who has an interest in the property? Check one Make: 3 1 the amount of any secured claims on Schedule D: Camry Creditors Who Have Claims Secured by Property. Model: Debtor 1 only 2003 Debtor 2 only Current value of the Current value of the 130.000 entire property? Approximate mileage: Debtor 1 and Debtor 2 only portion you own? Other information: ☐ At least one of the debtors and another Value According to KBB \$2,200.00 \$2,200.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No □ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$2,200.00 pages you have attached for Part 2. Write that number here.....=>

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

Official Form 106A/B Schedule A/B: Property

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14. Any other personal and household items you did not already list, including any health aids you did not list

■ No

☐ Yes. Give specific information.....

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here

\$2,400.00

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own? Do not deduct secured

Official Form 106A/B Software Copyright (c) 1996-2018 Best Case, LLC - www.bestcase.com Schedule A/B: Property

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Debto	r 1 Iyanna C Har ı	ris Line	coln	Document	raye 12 01 30	Case number (if known)	
							claims or exemptions.
	x <i>ampl</i> es: Money you ha No			ur home, in a safe depo		when you file your petitio	on .
						Cash on hand at time of filling	\$0.00
E.	institutions. If			accounts; certificates counts with the same ins		redit unions, brokerage h	ouses, and other similar
	vo Yes			Institution r	ame:		
		17.1.	Checking	Chase Ba	nk Account		\$22.00
		17.2.	Savings	Chase Ba	nk Account		\$52.00
		17.3.	Savings	Chase Ba	nk Account		\$392.00
		17.4.	Savings	Abri Cred	it Union Account		\$5.00
		17.5.	Checking	US Bank	Account		\$0.00
<i>E</i> .	•	•	•	th brokerage firms, mor	ey market accounts		
jo ■	int venture				orporated businesse	es, including an interest	in an LLC, partnership, and
_	. се. Сто оросии иис		me of entity:			% of ownership:	
N N	egotiable instruments i on-negotiable instrume	nclude pents are	personal checks those you cann	negotiable and non-no s, cashiers' checks, pro ot transfer to someone	missory notes, and mo	oney orders.	
		RA, ERIS	SA, Keogh, 401	(k), 403(b), thrift saving	s accounts, or other p	ension or profit-sharing p	olans

☐ Yes. List each account separately.

Type of account:

Institution name:

22. Security deposits and prepayments

Official Form 106A/B

Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

■ No	
☐ Yes	Institution name or individual

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Document Page 13 of 56 Case number (if known) Debtor 1 Iyanna C Harris Lincoln 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No ☐ Yes. Give specific information about them... Current value of the Money or property owed to you? portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ☐ No Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 2017 Anticipated Tax Refund based on 2016 **Federal** \$568.00 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: **Northwestern Mutual Term Life**

Insurance

\$0.00 No cash value

Term Life Insurance with Employer

\$0.00

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53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

■ No

☐ Yes. Give specific information.......

54. Add the dollar value of all of your entries from Part 7. Write that number here

Describe All Property You Own or Have an Interest in That You Did Not List Above

\$0.00

Official Form 106A/B Schedule A/B: Property page 5

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Case number (if known) Document Debtor 1 Iyanna C Harris Lincoln

Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$0.00
56.	Part 2: Total vehicles, line 5	\$2,200.00		
57.	Part 3: Total personal and household items, line 15	\$2,400.00		
58.	Part 4: Total financial assets, line 36	\$1,039.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$5,639.00	Copy personal property total	\$5,639.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$5,639.00

Official Form 106A/B Schedule A/B: Property page 6 Case 18-14120 Doc 1 Filed 05/15/18 Entered 05/15/18 14:02:20 Desc Main

Page 16 of 56 Document Fill in this information to identify your case: Debtor 1 Iyanna C Harris Lincoln Middle Name Last Name First Name Debtor 2 First Name Middle Name (Spouse if, filing) Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) ☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify	the /	Property	You	Claim	as	Exempt
---------	----------	-------	-----------------	-----	-------	----	--------

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Check only one box for each exemption. Schedule A/B		ck only one box for each exemption.	
2003 Toyota Camry 130,000 miles Value According to KBB	\$2,200.00		\$2,200.00	735 ILCS 5/12-1001(c)
Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
Houeshold Goods and Furnishings Line from Schedule A/B: 6.1	\$1,800.00	•	\$1,800.00	735 ILCS 5/12-1001(b)
Line Holli Schedule A.B. G.1			100% of fair market value, up to any applicable statutory limit	
Necessary Wearing Apparel Line from Schedule A/B: 11.1	\$500.00		\$500.00	735 ILCS 5/12-1001(a)
Ellie Holli Gonedale AVB. TTT			100% of fair market value, up to any applicable statutory limit	
Costume Jewelry Line from Schedule A/B: 12.1	\$100.00		\$100.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B. 12.1			100% of fair market value, up to any applicable statutory limit	
Checking: Chase Bank Account Line from Schedule A/B: 17.1	\$22.00		\$22.00	735 ILCS 5/12-1001(b)
Ello II olii Soriodalo 74 D. 1111			100% of fair market value, up to any applicable statutory limit	

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	,			,	
	ef description of the property and line on hedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	ivings: Chase Bank Account	\$52.00		\$52.00	735 ILCS 5/12-1001(b)
LIII	le Hotti Schedule A/B. 11.2			100% of fair market value, up to any applicable statutory limit	
	ivings: Chase Bank Account	\$392.00		\$392.00	735 ILCS 5/12-1001(b)
LIN	te from Scriedule A/B. 11.3			100% of fair market value, up to any applicable statutory limit	
	vings: Abri Credit Union Account	\$5.00		\$5.00	735 ILCS 5/12-1001(b)
LIII	le Hotti Schedule A/B. 111.4			100% of fair market value, up to any applicable statutory limit	
	deral: 2017 Anticipated Tax Refund	\$568.00		\$568.00	735 ILCS 5/12-1001(b)
	te from Schedule A/B: 28.1			100% of fair market value, up to any applicable statutory limit	
(St	e you claiming a homestead exemption of abject to adjustment on 4/01/19 and every in No	3 years after that for ca	ases fi	,	,
	Yes. Did you acquire the property covered No	ed by the exemption wi	ithin 1	,215 days before you filed this case	?
	☐ Yes				

Document Fill in this information to identify your case: Debtor 1 Iyanna C Harris Lincoln First Name Middle Name Last Name Debtor 2 First Name Middle Name Last Name (Spouse if, filing) United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) ☐ Check if this is an

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

amended filing

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

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Page 19 of 56 Document Fill in this information to identify your case: Debtor 1 Iyanna C Harris Lincoln Middle Name Last Name First Name Debtor 2 First Name Middle Name Last Name (Spouse if, filing) United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) ☐ Check if this is an amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims Do any creditors have priority unsecured claims against you? No. Go to Part 2. ☐ Yes. List All of Your NONPRIORITY Unsecured Claims Part 2: 3. Do any creditors have nonpriority unsecured claims against you? ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. **Total claim** 4.1 **Associated Radiologits of Joliet** Last 4 digits of account number 9900 \$1.55 Nonpriority Creditor's Name When was the debt incurred? 2017 1200 Maple Rd, Joliet, IL 60432 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

■ Other. Specify Medical

Best Case Bankruptcy

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Debtor 1 Iyanna C Harris Lincoln Case number (if know) 4.2 Athletico Last 4 digits of account number \$250.00 Nonpriority Creditor's Name 3454 S Halsted St. When was the debt incurred? 2018 Chicago, IL 60608 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Medical Other. Specify 4.3 **Capital One** Last 4 digits of account number 1382 \$1,999.00 Nonpriority Creditor's Name Attn: Bankruptcy Opened 02/17 Last Active Po Box 30285 When was the debt incurred? 5/08/18 Salt Lake City, UT 84130 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes 4.4 \$665.00 **Capital One** Last 4 digits of account number 7768 Nonpriority Creditor's Name Opened 01/17 Last Active Attn: Bankruptcy Po Box 30285 When was the debt incurred? 4/23/18 Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

■ No

☐ Yes

■ Other. Specify Credit Card

☐ Debts to pension or profit-sharing plans, and other similar debts

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Debtor 1 Iyanna C Harris Lincoln Case number (if know) 4.5 Cda/Pontiac Last 4 digits of account number 9552 \$333.00 Nonpriority Creditor's Name Attn: Bankruptcy When was the debt incurred? **Opened 09/17** Po Box 213, 415 E Main Street Streator, IL 61364 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts **Collection Attorney Adv Family Dental** ■ Other. Specify Chiro / Lo ☐ Yes 4.6 **Chase Card Services** \$457.00 Last 4 digits of account number 0278 Nonpriority Creditor's Name **Correspondence Dept** Opened 08/17 Last Active Po Box 15298 When was the debt incurred? 4/15/18 Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes 4.7 \$0.00 Citicard 3000 Last 4 digits of account number Nonpriority Creditor's Name Opened 11/18/13 Last Active **General Correspondence** Po Box 6500 When was the debt incurred? 11/12/15 Sioux Falls, SD 57117 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

■ Other. Specify Charge Account

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Debtor 1 Iyanna C Harris Lincoln Case number (if know) 4.8 **Creditors Discount and Audit** Last 4 digits of account number 3984 \$332.70 Nonpriority Creditor's Name 415 E Main St. When was the debt incurred? 2018 Streator, IL 61364 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collection for ADV Family ☐ Yes 4.9 **EM Strategies LTD** Last 4 digits of account number 8009 \$24.23 Nonpriority Creditor's Name **PO BOX 487** When was the debt incurred? 2018 Bedford Park, IL 60499 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Medical 4.1 **EM Strategies LTD** \$24.23 Last 4 digits of account number 0 Nonpriority Creditor's Name **PO BOX 487** 2017 When was the debt incurred? Bedford Park, IL 60499 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

■ Other. Specify Medical

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1 Iyanna C Harris Lincoln		Case number (if know)	
Enterprise Rent a Car	Last 4 digits of account number	1031	\$763.97
Nonpriority Creditor's Name DAMAGE Recovery Unit BOB PO BOX 801988	When was the debt incurred?	2017	
Kansas City, MO 64180 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Collection		
Georgia Natural Gas	Last 4 digits of account number	3563	\$258.94
Nonpriority Creditor's Name PO BOX 105445 Palm Beach, FL 33480	When was the debt incurred?	2017	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	☐ Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Consumer		
Iq Data International	Last 4 digits of account number	2534	\$7,809.00
Nonpriority Creditor's Name 1010se Everett Mall Way Everett, WA 98208	When was the debt incurred?	Opened 12/21/17	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community debt		aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	•	
No	Debts to pension or profit-sharing		
∏ yes	Other Cresify 09 Gardens	Of Fast Cobb Ga	

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Case number (if know)

Iyanna C Harris Lincoln		Case number (ii know)	
Kohls/Capital One	Last 4 digits of account number	0402	\$150.00
Nonpriority Creditor's Name Kohls Credit Po Box 3120	When was the debt incurred?	Opened 03/13 Last Active 04/16	
Milwaukee, WI 53201 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	■ Other. Specify Charge Acc	count	
Marietta power	Last 4 digits of account number	7479	\$175.12
Nonpriority Creditor's Name 675 North Marietta Marietta, GA 30060	When was the debt incurred?	2017	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Consumer		
Presence Health	Last 4 digits of account number		\$11.55
Nonpriority Creditor's Name 62397 Collections Center Drive Chicago, IL 60693	When was the debt incurred?	2018	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
\square Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
□Yes	Other Specify Medical		

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	0.1114	_
Quantaom Radiology	Last 4 digits of account number QUN1	
Nonpriority Creditor's Name PO BOX 3157	When was the debt incurred? 2018	
Indianapolis, IN 46206		
Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	_	
Debtor 1 only	Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	□ Debts to pension or profit-sharing plans, and other similar debts	
■ No □ Yes		
⊔ Yes	■ Other. Specify Medical	
Rush Copley	Last 4 digits of account number	\$1
Nonpriority Creditor's Name		
PO BOX 352	When was the debt incurred? 2018	
Aurora, IL 60507 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	□ Unliquidated	
☐ Debtor 1 and Debtor 2 only	Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Medical	
Silver Cross Hospital		¢4.0
Nonpriority Creditor's Name	Last 4 digits of account number	\$1,0
1900 Silver Cross Blvd	When was the debt incurred? 2018	
New Lenox, IL 60451		
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	П	
Debtor 1 only	Contingent	
Debtor 2 only	Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	□ Debts to pension or profit-sharing plans, and other similar debts	

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Case number (if know)

1 Iyanna C Harris Lincoln		Case number (if know)	
State Collection Services Inc.	Last 4 digits of account number	5357	\$13
Nonpriority Creditor's Name PO BOX 6250	When was the debt incurred?	2017	
Madison, WI 53716 Number Street City State Zlp Code	As of the date you file, the claim	is: Chack all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim	в. Спеск ан тат арргу	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharir	ng plans, and other similar debts	
Yes	Other. Specify Collection	for well star	
Target	Last 4 digits of account number	3363	\$27
Nonpriority Creditor's Name			
Target Card Services	Miles and the state time summer 10	Opened 09/15 Last Active 4/14/18	
Mail Stop NCB-0461 Minneapolis, MN 55440	When was the debt incurred?	4/14/18	
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Credit Card	<u>1</u>	
The Bortolazzo Gruop LLC	Last 4 digits of account number	8494	\$50
Nonpriority Creditor's Name			
PO BOX 277234 Atlanta, GA 30384	When was the debt incurred?	2018	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt	☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	·	
■ No	☐ Debts to pension or profit-sharing	ng plans, and other similar debts	
∏ yes	Other Court, Collection		

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	Ousc 10 14120 D00 1	Document Page 2	7 of 56	viairi	
Debt	or 1 Iyanna C Harris Lincoln		Case number (if know)		
4.2	Us Dept of Ed	Last 4 digits of account number	7581	\$48,494.00	
,	Nonpriority Creditor's Name Attn: Bankruptcy 2401 International Lane Madison, WI 53704	When was the debt incurred?	Opened 05/17 Last Active 3/01/18		
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	☐ Other. Specify			
		Educationa	ıl		
4.2 4	Verizon	Last 4 digits of account number	0001	\$1,500.00	
	Nonpriority Creditor's Name Attn: Wireless Bankrupty Admin 500 Technology Dr Ste 500 Weldon Springs, MO 63304	When was the debt incurred?	Opened 11/13 Last Active 8/28/15		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim			
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	☐ Yes	Other. Specify Consumer			
4.2 5	Wellstar Health System	Last 4 digits of account number	2595	\$137.00	
	Nonpriority Creditor's Name PO BOX 42625	When was the debt incurred?	2018		
	Atlanta, GA 30374 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure			
	☐ Check if this claim is for a community	☐ Student loans			

Part 3: List Others to Be Notified About a Debt That You Already Listed

 \square Obligations arising out of a separation agreement or divorce that you did not

 \square Debts to pension or profit-sharing plans, and other similar debts

debt

No

☐ Yes

■ Other. Specify Medical

report as priority claims

Is the claim subject to offset?

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Debtor 1 Iyanna C Harris Lincoln

Case number (if know)

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total				
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
	6f.	Student loans	6f.	\$ 48,494.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 17,017.65
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 65,511.65

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		Бобатье	1 440 20 01 00	
Fill in this infor	rmation to identify your	case:		
Debtor 1	Iyanna C Harris L	incoln		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - □ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 Mack Properties
4740 S. Woodlawn, Ave, Apt 2B
Chicago, IL 60615

State what the contract or lease is for
\$1,320.00 a month residential lease

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	0430 10 14120 1	Docume	nt Page 30 d	of 56	10 Describant
Fill in this in	formation to identify your	case:			
Debtor 1	Iyanna C Harris L	incoln			
.	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number	r				
(if known)					Check if this is an amended filing
Official F	Form 106H				
Schedu	le H: Your Cod	ebtors			12/15
eople are fill	ing together, both are equ	ally responsible for supp boxes on the left. Attach	lying correct informat the Additional Page t	tion. If more space is ne	te as possible. If two married eeded, copy the Additional Page, of any Additional Pages, write
1. Do yo	u have any codebtors? (If	you are filing a joint case, c	lo not list either spouse	e as a codebtor.	
■ No □ Yes					
	the last 8 years, have you California, Idaho, Louisiana,				states and territories include
■ No. G	o to line 3.				
_	Did your spouse, former spou	use, or legal equivalent live	with you at the time?		
in line 2	again as a codebtor only i 6D), Schedule E/F (Official	f that person is a guarant	or or cosigner. Make	sure you have listed th	with you. List the person shown e creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	lumn 1: Your codebtor ne, Number, Street, City, State and ZI	P Code		Column 2: The cree Check all schedules	ditor to whom you owe the debt s that apply:
3.1				☐ Schedule D, line	;
Nar	me			□ Schedule E/F, lii	ne
				☐ Schedule G, line	·
Nur City	mber Street	State	ZIP Code		
3.2				☐ Schedule D, line	·
Nar	me			Schedule E/F, lin	
				☐ Schedule G, line	

Street

State

Number

City

ZIP Code

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							ì				
	in this information to identify your captor 1 Iyanna C Ha										
_	otor 2					_					
Uni	ted States Bankruptcy Court for the	: NORTHERN DISTRIC	T OF ILL	INOIS							
	se number lown)						☐ Ar				
0	fficial Form 106l						MI	M / DD/ Y	YYY		
S	chedule I: Your Inc	ome									12/15
sup spo atta	as complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	are married and not filing wi	ng jointly th you, d	, and your s o not includ	spouse i de infori	s liv natio	ing with y on about	you, incl your spo	ude informa ouse. If mor	ation abo re space i	ut your is needed,
1.	Fill in your employment information.		Debtor	1				Debtor 2	or non-fili	ng spous	se .
	If you have more than one job,	Employment status	■ Employed					☐ Employed			
	attach a separate page with information about additional	Linployment status	☐ Not employed					☐ Not e	mployed		
	employers.	Occupation	Sales	Sales							
	Include part-time, seasonal, or self-employed work.	Employer's name	Mighty	/ Legal							
	Occupation may include student or homemaker, if it applies.	Employer's address		Monroe, 5 go, IL 6060		•					
		How long employed the	here?	4 month	าร			_			
Par	Give Details About Mor	nthly Income									
spou	mate monthly income as of the dause unless you are separated.			Ü			·		•	·	· ·
	u or your non-filing spouse have mo e space, attach a separate sheet to		mbine the	e informatior	n for all e	mplo	oyers for t	hat perso	on on the line	es below.	If you need
							For Deb	tor 1	For Debt	tor 2 or g spouse)
2.	List monthly gross wages, sala deductions). If not paid monthly, or				2.	\$	3,	00.00	\$	N/A	<u>A</u>
3.	Estimate and list monthly overt	ime pay.			3.	+\$		0.00	+\$	N/A	<u>A</u>

3,000.00

N/A

Calculate gross Income. Add line 2 + line 3.

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Del	otor 1	Iyanna C Harris Lincoln	-		Case	number (if kno	wn)	-			
					For	Debtor 1			Debtor i-filing s		
	Cop	y line 4 here	4.		\$	3,000.	00	\$	-illing s	N/A	_
5.	l ist	all payroll deductions:									_
Ο.	5a.	Tax, Medicare, and Social Security deductions	5a	,	\$	542.	n 4	\$		N/A	
	5a. 5b.	Mandatory contributions for retirement plans	5k		\$ _		00	\$ 		N/A N/A	_
	5c.	Voluntary contributions for retirement plans	50		\$ -		00	<u>\$</u> _		N/A	_
	5d.	Required repayments of retirement fund loans	50		\$_		00	\$_		N/A	_
	5e.	Insurance	56		\$_	36.		\$_		N/A	_
	5f.	Domestic support obligations	5f		\$		00	\$_		N/A	_
	5g.	Union dues	50	g.	\$		00	\$		N/A	_
	5h.	Other deductions. Specify:		า.+	\$			+ \$		N/A	-
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	_ 6.		\$	578.	12	\$		N/A	-
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	2,421.		\$		N/A	-
8.	8b. 8c. 8d. 8e. 8f. 8g. 8h.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income Other monthly income. Specify:	_ 8f _ 8g	o. d. e.	\$\$ \$\$\$ \$\$\$ \$\$\$	0. 0. 0. 0.	00 00 00 00 00 00 00	\$ \$		N/A N/A N/A N/A N/A	- - -
9.		l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	_	Г	*_ \$		00	\$_		N/A	-
	_										
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_		2,421.88	\$_		N/A	= \$ _	2,421.88
11.	State Included the	the all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your principle friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a cify:	dep			•		,	Schedule 11.		0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The res e that amount on the Summary of Schedules and Statistical Summary of Certain lies							12.	\$	2,421.88
13.	Do :	you expect an increase or decrease within the year after you file this form No.	?						•	Combine monthl	ned y income
		Ves Explain:									

Official Form 106I Schedule I: Your Income page 2

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Fill	in this informa	ition to identify y	our case:			1						
Deb		Iyanna C Ha		oln		Che	eck if this is:					
	tor 2					☐ An amended filing ☐ A supplement showing postpetition chapte						
(Spc	ouse, if filing)						13 expenses as of	the following date:				
Unite	ed States Bankı	ruptcy Court for the	: NORTH	ERN DISTRICT OF ILLIN	OIS		MM / DD / YYYY					
	e number nown)											
Of	ficial Fo	rm 106J										
		J: Your						12/15				
info	rmation. If m		eded, atta	. If two married people ar ich another sheet to this i n.								
Part		ribe Your House	ehold									
1.	Is this a joir											
	■ No. Go to		in a separ	ate household?								
	□N		·									
	ПΥ	es. Debtor 2 mu	st file Offici	al Form 106J-2, Expenses	for Separate House	ehold of Del	btor 2.					
2.	Do you have	e dependents?	■ No									
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?				
	Do not state							□ No				
	dependents	names.						□ Yes □ No				
								☐ Yes				
								□ No				
								☐ Yes ☐ No				
								☐ Yes				
3.		penses include	. •	No	-							
		f people other t d your depende		Yes								
Par	t 2: Estim	ate Your Ongoi	ina Month	ly Expenses								
Esti	imate your ex	cpenses as of y	our bankr	uptcy filing date unless y y is filed. If this is a supp								
Incl	ude expense	s paid for with	non-cash	government assistance it	you know							
	value of suclicial Form 10		d have ind	cluded it on Schedule I: Y	our Income		Your exp	enses				
4.		or home owners		ses for your residence. In	nclude first mortgag	e 4.	\$	660.00				
	If not includ	led in line 4:										
	4a. Real e	estate taxes				4a.	\$	0.00				
		rty, homeowner'	s, or renter	's insurance		4b.	·	13.00				
				upkeep expenses		4c.		0.00				
5.		owner's associa		dominium dues our residence, such as ho	me equity loops	4d. 5.	·	0.00				
J.	Auditional	nortyaye payin	ento for yo	our residence, such as not	ne equity loans	ວ.	Ψ	0.00				

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	aoo mam	ber (if known)	
Utilities:			
6a. Electricity, heat, natural gas	6a.	\$	188.00
6b. Water, sewer, garbage collection	6b.		0.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.		135.00
6d. Other. Specify:	6d.		0.00
Food and housekeeping supplies	- 7.	\$	350.00
Childcare and children's education costs	8.	\$	0.00
Clothing, laundry, and dry cleaning		·	50.00
	10.	·	
Personal care products and services			50.00
Medical and dental expenses	11.	Ф	60.00
Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$	350.00
Entertainment, clubs, recreation, newspapers, magazines, and books	13.	·	50.00
Charitable contributions and religious donations	14.		20.00
_	14.	Ψ	20.00
Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.			
15a. Life insurance	15a.	\$	0.00
15b. Health insurance	15b.	·	0.00
15c. Vehicle insurance	15c.	·	60.00
15d. Other insurance. Specify:	15d.		0.00
Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.	_ 130.	Ψ	0.00
Specify:	16.	\$	0.00
Installment or lease payments:	_ 10.	Ψ	0.00
17a. Car payments for Vehicle 1	17a.	\$	0.00
17b. Car payments for Vehicle 2	17b.		0.00
17c. Other. Specify: Student Loans	17c.	·	273.00
17d. Other. Specify:	- 17d.	*	0.00
Your payments of alimony, maintenance, and support that you did not report as	_ 174.	Ψ	0.00
deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
Other payments you make to support others who do not live with you.		\$	0.00
Specify:	19.		
Other real property expenses not included in lines 4 or 5 of this form or on Schedu	_	our Income.	
20a. Mortgages on other property	20a.		0.00
20b. Real estate taxes	20b.	\$	0.00
20c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
20d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
20e. Homeowner's association or condominium dues	20e.	·	0.00
Other: Specify: Pet Care	21.	· -	100.00
ret date		- Ψ	100.00
Calculate your monthly expenses			
22a. Add lines 4 through 21.		\$	2,359.00
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c. Add line 22a and 22b. The result is your monthly expenses.		\$	2,359.00
, , ,		· —	
Calculate your monthly net income.			
23a. Copy line 12 (your combined monthly income) from Schedule I.	23a.		2,421.88
	23b.	-\$	2,359.00
23b. Copy your monthly expenses from line 22c above.			·
23c. Subtract your monthly expenses from your monthly income.	22-	œ.	£2 00
	23c.	\$	62.88
23c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .		-	62.88
 23c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i>. Do you expect an increase or decrease in your expenses within the year after your 	file this	form?	
 23c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i>. Do you expect an increase or decrease in your expenses within the year after you for example, do you expect to finish paying for your car loan within the year or do you expect your monthly income. 	file this	form?	
 23c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i>. Do you expect an increase or decrease in your expenses within the year after your 	file this	form?	

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							•
Fill in t	his inform	nation to identify your	case:				
Debtor	1	Iyanna C Harris L					
		First Name	Middle Name	La	st Name		
Debtor	_						
(Spouse i	f, filing)	First Name	Middle Name	La	st Name		
United	States Bar	kruptcy Court for the:	NORTHERN DISTRI	CT OF ILLING	ois		
C							
(if known)							☐ Check if this is an
, ,							amended filing
							5
Officia	al Form	106Dec					
Dec	larati	on About a	n Individus	al Daht	or's Sch	عماييامه	12/15
	iarati	OII About a	- III III ai Viaac	ai DCDt	01 3 00110	<u>caaics</u>	12/15
If two m	narried ned	ople are filing together	, both are equally res	nonsible for	supplying correct	information	
	•			•			
							tement, concealing property, or
		U.S.C. §§ 152, 1341, 1		ankruptcy cas	se can result in fir	nes up to \$250,0	000, or imprisonment for up to 20
, ca. c, c		0.0.0.33 .02, .0, .	0.0,				
	Sign	Below					
Di	d you pay	or agree to pay some	one who is NOT an at	torney to help	you fill out bank	ruptcy forms?	
	l No						
	Yes. N	ame of person				Attach Bai	nkruptcy Petition Preparer's Notice,
						Declaratio	n, and Signature (Official Form 119)
Un	der penalt	y of perjury, I declare	that I have read the si	ummary and	schedules filed w	ith this declarat	ion and
		true and correct.		, , , , ,			
~	lal branc	na C Harria I inaaln		v			
^		na C Harris Lincoln C Harris Lincoln		X	Signature of Deb	ntor 2	
		e of Debtor 1			Signature of Dec	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	•						
	Date M	lay 15, 2018			Date		

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Ħ	ll in this inform	nation to identify you	r case:								
De	ebtor 1	Iyanna C Harris									
De	ebtor 2	First Name	Midd	dle Name		Last Name					
1 -	oouse if, filing)	First Name	Mido	dle Name		Last Name					
Ur	nited States Bar	nkruptcy Court for the:	NORTH	ERN DISTRICT C	OF ILLIN	IOIS					
Ca	ase number										
	(nown)							☐ CI	heck if this is an		
								ar	mended filing		
_	fficial Fo						_				
St	tatement	of Financial	Affairs	for Individ	duals	Filing for E	Bankruptcy		4/1		
		nd accurate as poss ore space is needed									
		n). Answer every que		parate sneet to	1115 101	in. On the top or an	iy additional pages	, write you	i name and case		
Pa	art 1: Give D	etails About Your M	arital Status	and Where You	Lived I	Before					
1.		current marital state	167								
•	_	our one maritar state									
	☐ Married	art and									
	■ Not mar	ried									
2.	During the last 3 years, have you lived anywhere other than where you live now?										
	□ No										
	Yes. List	t all of the places you	lived in the la	ast 3 years. Do no	ot includ	e where you live nov	w.				
	Debtor 1 Pri	ior Address:		Dates Debtor 1		Debtor 2 Prior A	ddress:		Dates Debtor 2		
	312 Nobes	: Ave		lived there From-To:		☐ Same as Debtor	1		lived there ☐ Same as Debtor 1		
				2/2007-1/2017		- Came as Debior	•		From-To:		
	2850 Delk	Rd. Apt 38F		From-To:		☐ Same as Debtor	1		☐ Same as Debtor 1		
	Marietta, G	SA 30067		3/2017-12/201	7				From-To:		
3.	Within the la	ıst 8 vears, did vou e	ver live with	a spouse or lea	al equi	valent in a commu	nity property state	or territory	? (Community property		
		es include Arizona, Ca									
	■ No										
	_	ke sure you fill out Sc	hedule H: Yo	our Codebtors (Of	fficial Fo	rm 106H).					
D.	ert 2 Eveloid	n the Sources of Vo	ır İncomo								
Га	ert 2 Explain	n the Sources of You	ir income								
4.	Fill in the tota	e any income from end all amount of income you go a joint case and you	u received f	rom all jobs and a	all busin	esses, including part	t-time activities.	ious calen	dar years?		
	□ No										
	_	in the details.									
			Dobte: 4				Dobter 2				
			Debtor 1 Sources of	of income	Gros	s income	Debtor 2 Sources of inco	me	Gross income		
			Check all t		(befo	re deductions and usions)	Check all that ap		(before deductions and exclusions)		

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Case number (if known) Debtor 1 Iyanna C Harris Lincoln

				Debtor 1		Debtor 2		
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)
		■ Wages, commissions, bonuses, tips	\$12,548.49	☐ Wages, com bonuses, tips	missions,			
				☐ Operating a business		☐ Operating a	business	
		dar year: December	31, 2017)	■ Wages, commissions, bonuses, tips	\$0.00	☐ Wages, com bonuses, tips	missions,	
				☐ Operating a business		☐ Operating a	business	
		dar year be December		■ Wages, commissions, bonuses, tips	\$0.00	☐ Wages, com bonuses, tips	missions,	
				☐ Operating a business		☐ Operating a	business	
	winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No Yes. Fill in the details.							
				5.14		D 1/ 0		
				Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of inc Describe below		Gross income (before deductions and exclusions)
Part 3	List	Certain Pa	yments You	Made Before You Filed for E				
6. A	_	Neither De individual puring the	ebtor 1 nor Dorimarily for a 90 days before	s debts primarily consumer bebtor 2 has primarily consu personal, family, or househol- re you filed for bankruptcy, did	mer debts. Consumer debt d purpose."			1(8) as "incurred by an
	□ No. Go to line 7. □ Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.							
	Yes.			r both have primarily consure you filed for bankruptcy, did		l of \$600 or more?	ı	
		■ No.	Go to line 7					
		□ Yes	List below e	each creditor to whom you paid ments for domestic support of this bankruptcy case.				
C	Creditor'	s Name and	d Address	Dates of payme	nt Total amount	Amount you	Was this p	payment for

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 Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed a Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are an officer, director, person in control, or owner of 20% or more of their voting secula business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic supportation. No Yes. List all payments to an insider. 				rships of which you	ou are a genera ny managing a	al partner; corporations agent, including one for
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	Within 1 year before you filed for bankrup insider? Include payments on debts guaranteed or co		•		ccount of a d	ebt that benefited an
	☐ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment ditor's name
Par	4: Identify Legal Actions, Repossession	ons, and Foreclosures				
9.	Within 1 year before you filed for bankrup List all such matters, including personal injur modifications, and contract disputes. No Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of th	ne case
	Gardens 75 vs IYANNA HARRIS LINCOLN, DESIREE RIVERA, et al. 17E17918	CIVIL DISMISSAL	COBB COUNTY MAGISTRATE		☐ Pending ☐ On appe	eal
					- 0.00	
	Gardens 75 vs IYANNA HARRIS LINCOLN, YESSICA GOMEZ, et al. 17E14395	CIVIL DISMISSAL	COBB COUNTY MAGISTRATE		☐ Pending ☐ On appe	eal
					- 0.00	
10.	Within 1 year before you filed for bankrup Check all that apply and fill in the details belo No. Go to line 11.		erty repossessed, fo	oreclosed, garnis	shed, attache	d, seized, or levied?
	Yes. Fill in the information below.	Describe the Drevents		Dete		Value of the
	Creditor Name and Address	Describe the Property		Date		Value of the property
		Explain what happened	I			
11.	Within 90 days before you filed for bankru accounts or refuse to make a payment be No Yes. Fill in the details.		luding a bank or fin	ancial institutior	n, set off any a	amounts from your
	Creditor Name and Address	Describe the action the	creditor took		action was	Amount
				taker	1	

Page 39 of 56 Document Debtor 1 Iyanna C Harris Lincoln Case number (if known) 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No ☐ Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Value Dates you gave the gifts per person Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? ■ No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed **Charity's Name** Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of transferred or transfer was Address payment Email or website address made Person Who Made the Payment, if Not You **Upright Law LLC** 5/2018 **Attorney Fees** \$665.00 **79 West Monroe** Fifith Floor Chicago, IL 60603

dgallagher@uprightlaw.com

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Debtor 1 Iyanna C Harris Lincoln

17.	Within 1 year before you filed for bankrupto promised to help you deal with your credito Do not include any payment or transfer that yo	ors or to make payments			or transfer any proper	ty to anyone who
	■ No					
	Yes. Fill in the details.					
	Person Who Was Paid Address	Description and v transferred	alue of any prope	erty	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankrupt transferred in the ordinary course of your b Include both outright transfers and transfers minclude gifts and transfers that you have alread No.	usiness or financial affa ade as security (such as	airs? the granting of a se			
	NoYes. Fill in the details.					
	Person Who Received Transfer Address	Description and very property transfer			any property or received or debts change	Date transfer was made
	Person's relationship to you			para in ox	onungo	
19.	Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro No Yes. Fill in the details.		ny property to a se	elf-settled tru	ust or similar device o	of which you are a
	Name of trust	Description and v	alue of the prope	erty transferr	ed	Date Transfer was
						made
Par	8: List of Certain Financial Accounts, In:	struments, Safe Deposi	t Boxes, and Stor	age Units		
20.	Within 1 year before you filed for bankrupto sold, moved, or transferred? Include checking, savings, money market, chouses, pension funds, cooperatives, asso	or other financial accou	nts; certificates o	f deposit; sh		
	Yes. Fill in the details.					
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of accoun instrument	clo mo	te account was osed, sold, oved, or nsferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 cash, or other valuables?	year before you filed for	bankruptcy, any	safe deposit	t box or other deposi	tory for securities,
	No					
	Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		escribe the	contents	Do you still have it?
22.	Have you stored property in a storage unit	or place other than you	home within 1 ye	ear before yo	ou filed for bankruptc	y?
	No					
	Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or l to it? Address (Number, S State and ZIP Code)		escribe the	contents	Do you still have it?

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Debtor 1 Iyanna C Harris Lincoln

Pai	t 9: Identify Property You Hold or Control for	Someone Else			
23.	Do you hold or control any property that someo for someone.	ne else owns? Include any prop	erty y	ou borrowed from, are storing for,	or hold in trust
	■ No □ Yes. Fill in the details.				
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	De	scribe the property	Value
Pai	t 10: Give Details About Environmental Informa	ation			
For	the purpose of Part 10, the following definitions	apply:			
	Environmental law means any federal, state, or toxic substances, wastes, or material into the ai regulations controlling the cleanup of these substances.	ir, land, soil, surface water, grou	_	•	
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal	•	al law,	whether you now own, operate, o	r utilize it or used
	Hazardous material means anything an environment hazardous material, pollutant, contaminant, or s	mental law defines as a hazardo	us wa	ste, hazardous substance, toxic s	ubstance,
Rep	ort all notices, releases, and proceedings that yo	ou know about, regardless of wh	en the	ey occurred.	
24.	Has any governmental unit notified you that you	ı may be liable or potentially liab	le und	der or in violation of an environme	ntal law?
	■ No □ Yes. Fill in the details.				
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State & ZIP Code)	and	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of any	release of hazardous material?			
	■ No □ Yes. Fill in the details.				
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State & ZIP Code)	and	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or adminis	strative proceeding under any en	viron	mental law? Include settlements a	nd orders.
	■ No □ Yes. Fill in the details.				
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ture of the case	Status of the case
Pai	t 11: Give Details About Your Business or Con	nections to Any Business			
27.	Within 4 years before you filed for bankruptcy, o	did you own a business or have a	any of	the following connections to any	business?
	☐ A sole proprietor or self-employed in a t	rade, profession, or other activit	y, eith	ner full-time or part-time	
	☐ A member of a limited liability company	(LLC) or limited liability partners	ship (l	_LP)	
	☐ A partner in a partnership				
	☐ An officer, director, or managing execut	ive of a corporation			
	☐ An owner of at least 5% of the voting or	equity securities of a corporatio	n		

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Case number (if known) Document Debtor 1 Iyanna C Harris Lincoln

	■ No. None of the above applies. Go to I	Part 12.	
	☐ Yes. Check all that apply above and fill	I in the details below for each business.	
	Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
	(Number, Street, City, State and 21r Code)	Name of accountant or bookkeeper	Dates business existed
28.	Within 2 years before you filed for bankrupt institutions, creditors, or other parties.	tcy, did you give a financial statement to a	nyone about your business? Include all financial
	■ No □ Yes. Fill in the details below.		
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued	
Pai	t 12: Sign Below		
are with		false statement, concealing property, or o	declare under penalty of perjury that the answers obtaining money or property by fraud in connection ars, or both.
	lyanna C Harris Lincoln	Circulature of Dahton C	
,	nna C Harris Lincoln nature of Debtor 1	Signature of Debtor 2	
Da	e _May 15, 2018	Date	
Did ■ N		ent of Financial Affairs for Individuals Filir	ng for Bankruptcy (Official Form 107)?
Did ■ N	you pay or agree to pay someone who is no	t an attorney to help you fill out bankrupto	y forms?
		uptcy Petition Preparer's Notice, Declaration,	and Signature (Official Form 119).

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Debtor 1	Iyanna C Harris	Lincoln		
	First Name	Middle Name	Last Name	
ebtor 2 pouse if, filing)	First Name	Middle Name	Last Name	
nited States Ba	ankruptcy Court for the:	NORTHERN DIST	FRICT OF ILLINOIS	
ase number known)				☐ Check if this is an
				amended filing
official Ec	orm 100			
official Fo		on for Indiv	riduals Filing Under Chapte	r 7
tateme	iii Oi iiiiGiitii	on for mary	riduals i lillig Offder Chapte	12/1
ou are an ind	dividual filing under ch	anter 7. vou must fil	Lout this form if:	
	ve claims secured by y	-	Tout this form it.	
	sed personal property		ot expired	
	ever is earlier, unless		you file your bankruptcy petition or by the date set e time for cause. You must also send copies to the	
	eople are filing togeth and date the form.	er in a joint case, bo	th are equally responsible for supplying correct infe	armatian Bath dahtara mu
sign a		-	an are equally responsible for supplying correct inte	ormation. Both deptors mus
	ind date the form.	-	ar are equally responsible for supplying correct in	ormation. Both deptors mus
	and accurate as poss		s needed, attach a separate sheet to this form. On th	
write y	and accurate as poss your name and case n	umber (if known).		
write y	and accurate as poss your name and case no Your Creditors Who Ha	umber (if known).	s needed, attach a separate sheet to this form. On th	ne top of any additional page
write y art 1: List Y For any credition b	and accurate as poss your name and case no Your Creditors Who Ha itors that you listed in pelow.	umber (if known). ve Secured Claims Part 1 of Schedule D	s needed, attach a separate sheet to this form. On the	ne top of any additional page (Official Form 106D), fill in th
write y art 1: List Y For any credinformation b	and accurate as poss your name and case no Your Creditors Who Ha	umber (if known). ve Secured Claims Part 1 of Schedule D	s needed, attach a separate sheet to this form. On th	ne top of any additional page
write y art 1: List Y For any credit nformation b Identify the co	and accurate as poss your name and case no Your Creditors Who Ha itors that you listed in pelow.	umber (if known). ve Secured Claims Part 1 of Schedule D	es needed, attach a separate sheet to this form. On the control of	Official Form 106D), fill in the Did you claim the propas exempt on Schedule
write y art 1: List Y For any credition b	and accurate as poss your name and case no Your Creditors Who Ha itors that you listed in pelow.	umber (if known). ve Secured Claims Part 1 of Schedule D	s needed, attach a separate sheet to this form. On the control of	ne top of any additional page (Official Form 106D), fill in the
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write y art 1: List Y For any creditinformation b Identify the co	and accurate as poss your name and case no Your Creditors Who Ha itors that you listed in pelow. reditor and the property	umber (if known). ve Secured Claims Part 1 of Schedule D	s needed, attach a separate sheet to this form. On the control of	ne top of any additional page Official Form 106D), fill in the Did you claim the proper as exempt on Schedule
write y art 1: List Y For any creditinformation b Identify the co Creditor's name: Description of property	and accurate as poss your name and case no Your Creditors Who Ha itors that you listed in nelow. reditor and the property	umber (if known). ve Secured Claims Part 1 of Schedule D	s needed, attach a separate sheet to this form. On the control of	ne top of any additional page Official Form 106D), fill in the Did you claim the properties exempt on Schedule
write y art 1: List Y For any creditinformation b Identify the co Creditor's name: Description of property	and accurate as poss your name and case no Your Creditors Who Ha itors that you listed in nelow. reditor and the property	umber (if known). ve Secured Claims Part 1 of Schedule D	s needed, attach a separate sheet to this form. On the control of	ne top of any additional page Official Form 106D), fill in the Did you claim the properties exempt on Schedule
For any creditinformation be Identify the creditor's name: Description or property securing debt	and accurate as poss your name and case no Your Creditors Who Ha itors that you listed in nelow. reditor and the property	umber (if known). ve Secured Claims Part 1 of Schedule D	s needed, attach a separate sheet to this form. On the control of	Official Form 106D), fill in the Did you claim the propersion on Schedules No
write y art 1: List Y For any creditinformation b Identify the collision Creditor's name: Description of property securing debt Creditor's	and accurate as poss your name and case no Your Creditors Who Ha itors that you listed in nelow. reditor and the property	umber (if known). ve Secured Claims Part 1 of Schedule D	s needed, attach a separate sheet to this form. On the control of	ne top of any additional page Official Form 106D), fill in the Did you claim the proper as exempt on Schedule
For any creditinformation be Identify the creditor's name: Description or property securing debt	and accurate as poss your name and case no Your Creditors Who Ha itors that you listed in nelow. reditor and the property	umber (if known). ve Secured Claims Part 1 of Schedule D	Someoded, attach a separate sheet to this form. On the control of	Official Form 106D), fill in the Did you claim the properties exempt on Schedules No
For any creditinformation be Identify the control of property securing debt Creditor's	and accurate as poss your name and case no Your Creditors Who Ha itors that you listed in pelow. reditor and the property	umber (if known). ve Secured Claims Part 1 of Schedule D	Some eded, attach a separate sheet to this form. On the second of the se	Official Form 106D), fill in the Did you claim the properties exempt on Schedules No
For any credition of property securing debte of the creditor's name:	and accurate as poss your name and case no Your Creditors Who Ha itors that you listed in pelow. reditor and the property	umber (if known). ve Secured Claims Part 1 of Schedule D	Somewhat is needed, attach a separate sheet to this form. On the second of the content of the co	Official Form 106D), fill in the Did you claim the propas exempt on Schedule No Yes
write y art 1: List Y For any creditinformation by Identify the collection of property securing debt Creditor's name: Creditor's name: Description of property securing debt Creditor's name:	and accurate as poss your name and case no cour Creditors Who Hatitors that you listed in pelow. reditor and the property of	umber (if known). ve Secured Claims Part 1 of Schedule D	Some eded, attach a separate sheet to this form. On the second of the se	Official Form 106D), fill in the Did you claim the properties exempt on Schedules No
Part 1: List Y For any creditinformation by Identify the collision of property securing debt Creditor's name: Description of property securing debt Creditor's name: Description of property	and accurate as poss your name and case no cour Creditors Who Hatitors that you listed in pelow. reditor and the property of	umber (if known). ve Secured Claims Part 1 of Schedule D	Somewhat is needed, attach a separate sheet to this form. On the second of the content of the co	Official Form 106D), fill in the Did you claim the properties exempt on Schedules No

Official Form 108

Creditor's

name:

property

Description of

securing debt:

Statement of Intention for Individuals Filing Under Chapter 7

 \square Surrender the property.

 $\hfill\square$ Retain the property and redeem it.

 $\hfill\square$ Retain the property and enter into a

Reaffirmation Agreement.

☐ Retain the property and [explain]:

☐ Yes

☐ No

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Debtor 1 Iyanna C Harris Lincoln	Case number (if	Case number (if known)		
name: Description of property securing debt:	 □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: 	☐ Yes		
n the information below. Do not list real estate lea	Leases bu listed in Schedule G: Executory Contracts and Uneases. Unexpired leases are leases that are still in effe lease if the trustee does not assume it. 11 U.S.C. § 36	ct; the lease period has not yet ended.		
Describe your unexpired personal property lease	s	Will the lease be assumed?		
Lessor's name: Mack Properties		□ No ■ Yes		
Description of leased \$1,320.00 a month residence Property:	lential lease	_ 130		
Part 3: Sign Below Juder penalty of perjury, I declare that I have indicorpoperty that is subject to an unexpired lease.	cated my intention about any property of my estate th	nat secures a debt and any personal		
X /s/ Iyanna C Harris Lincoln Iyanna C Harris Lincoln Signature of Debtor 1	X Signature of Debtor 2			
Date May 15, 2018	Date			

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

С	hapter 7:	Liquidation
	\$245	filing fee
	\$75	administrative fee
<u>+</u>	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 18-14120 Doc 1 Filed 05/15/18 Entered 05/15/18 14:02:20 Desc Main Document Page 49 of 56

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

In re	Iyanna C Harris Lincoln	Case N	0.	
	Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPENSATION OF AT	TORNEY FOR I	DEBTOR(S)	
C	cursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the compensation paid to me within one year before the filing of the petition in bankre rendered on behalf of the debtor(s) in contemplation of or in connection with the contemplation of the debtor (s) in contemplation of the connection with the debtor (s) in contemplation of the connection with the contemplation of the debtor (s) in contemplation of the connection with the the connect	ruptcy, or agreed to be pa	aid to me, for services re	
	For legal services, I have agreed to accept	\$	665.00	
	Prior to the filing of this statement I have received		665.00	
	Balance Due	\$	0.00	
2. \$	335.00 of the filing fee has been paid.			
3. T	he source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
4. T	he source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
5. I	I have not agreed to share the above-disclosed compensation with any other p	person unless they are m	embers and associates o	f my law firm.
[I have agreed to share the above-disclosed compensation with a person or per copy of the agreement, together with a list of the names of the people sharing			aw firm. A
6. I	n return for the above-disclosed fee, I have agreed to render legal service for all	aspects of the bankrupto	y case, including:	
b c.	Analysis of the debtor's financial situation, and rendering advice to the debtor Preparation and filing of any petition, schedules, statement of affairs and plan Representation of the debtor at the meeting of creditors and confirmation hear [Other provisions as needed] All services, except those identified in paragraph 7 below, the debtor's bankruptcy objectives including but not limited to:	which may be required; ring, and any adjourned l	nearings thereof;	
	 (1) File the certificate required from the individual debtor fror counseling agency for prepetition credit counseling; (2) Preparation and filing of all locally required forms; (3) Representation of the debtor at the § 341 meeting; (4) Amend any list, schedule, statement, and/or other documnecessary or appropriate; (5) Motions under § 522(f) to avoid liens on exempt property; (6) Motions, such as motions for abandonment, or proceedin (7) Advise the debtor with respect to any reaffirmation agree agreements if in the best interest of the debtor; and attend al signed by the debtor; (8) Removal of garnishments or wage assignments; 	ent required to be file gs to clear title to rea ment; negotiate, prep	ed with the petition a all property owned by are and file reaffirm	as may be y the debtor; ation
	(9) Negotiate, prepare and file reaffirmation agreements; (10) Motions under § 722 to redeem exempt personal propert (11) Compile and forward to the trustee and the United States (12) Consult with the debtor and if there is a valid defense or automatic stay; (13) File the debtor's certification of completion of instruction (Official Form 423); and	s trustee any docume explanation, respon	d to a motion for reli	ef from the

By agreement with the debtor(s), the above-disclosed fee does not include the following service:

Notwithstanding any agreement to the contrary, representation of the Debtor in any dischargeability action, adversary proceedings, or heavily litigated matters that are not listed in Paragraph 6 above.

(14) Disclose any agreement and fee arrangement regarding the potential retention of co-counsel.

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In re	Iyanna C Harris Lincoln	Case No.	
	Debtor(s)		

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

(Continuation Sneet)					
CERTIFICATION					
I certify that the foregoing is a complete statem this bankruptcy proceeding.	nent of any agreement or arrangement for payment to me for representation of the debtor(s) in				
May 15, 2018 Date	/s/ David Gallagher David Gallagher Signature of Attorney Upright Law LLC 79 West Monroe Fifith Floor Chicago, IL 60603 312-546-4264 Fax: 844-402-1128 dgallagher@uprightlaw.com Name of law firm				

Upright Law LLC

ATTORNEY-CLIENT LEGAL SERVICES AGREEMENT FOR CHAPTER 7 BANKRUPTCY

This Agreement is executed between Upright Law LLC ("Firm") and the undersigned ("Client"). The undersigned Partner of Firm has authorized Firm to affix Partner's digital signature upon this Agreement ("Agreement"). Agreement is subject to Partner's further review and approval after consultation with Client. Agreement contemplates bankruptcy related services ("Services") ONLY and no other representation. The Partner will review this Agreement with Client, including which chapter of bankruptcy Client is eligible for.

- 1. Type of Bankruptcy Representation and Scope of Services. Client hires Firm (and not any specific attorney) to provide Services. Firm will immediately begin providing Services and accrue billable time. Services include all representation to complete Client's legal matter, except Agreement does not include representation in any objection to discharge, adversary proceeding or any heavily contested matter or Services that could not have been contemplated after reasonable diligence by Firm when this Agreement was signed ("Additional Services"). Firm requires upfront payment for Additional Services, which are billed at \$395.00 per hour for attorney time (or the highest hourly rate permitted in Client's jurisdiction) and \$125.00 per hour for paraprofessional time billed in sixminute increments.
- 2. Type of Fee ("Fee"). Client hires Firm under a "FLAT FEE" Agreement whereby Firm agrees to provide Services for a fixed amount of \$ 665.00 , plus the Bankruptcy Court filing fee of \$ 335.00 for a total Flat Fee of \$ 1000.00 ("Total Flat Fee"). Because this is a flat fee representation, Firm will not provide a monthly accounting. Fee is earned when paid and immediately becomes property of Firm. Fees will be placed into Firm's general expense/operating account and NOT into any Firm IOLTA client trust fund account. Client has sixty days from Client's final payment of Fees to turn in all requested documents or, if Firm has to spend additional time collecting documents due to Client's unreasonable delay, Client may be charged an additional Flat Fee of \$375.00, and any amounts on deposit with Firm to pay filing fees or other costs will be applied toward that \$375.00 Fee. No Chapter 7 petition will be filed until all Fees and costs are paid in full and Client provides all documents. The Flat Fee may increase if Client gives inaccurate information during the course of Firm's representation.
- Register 3. Payment Term and Authorization. Client may only use a debit card, but not a credit card to pay for Services. Client, who lives in zip code 60615 , is a duly authorized signor on the account ending in 2574 , expiring 04/23 . Firm is authorized to charge account ending in 2574 , the Total Flat Fee of \$ 1000.00 , by single/recurring debits. Client authorizes Firm to adjust debits as necessary to fully pay the Total Flat Fee. Client may cancel future payments only by written notice at least five days in advance. This authorization is effective until Client has paid the Total Flat Fee or has cancelled the authorization. Firm's authority to deduct funds from Client's account ceases upon payment in full of Total Flat Fee, and under no circumstances may the firm deduct funds from the client's account after the case has been filed. Firm is not responsible for damages/costs/fees related to authorized payments. Client will be charged \$25.00 for each bounced payment.

- 4. Virtual Representation. Firm represents Client primarily through means of telephonic and online communication via email, phone or computer-based virtual meeting room, and not face-to-face at a physical office. Client has elected to use Firm, in part, because Client finds this service to be more efficient and convenient. Client has the right to meet with Partner in person at a mutually agreeable time and location.
- 5. Refund Policy. If Client cancels, Client will be charged for all Services up to the date of cancellation. Firm will provide an accounting along with any unearned portion of the Fee.
- Debtor's Obligations to Pay Credit Counseling/Debtor Education. In addition to the Flat Fee, Client is 6. obligated to obtain/pay for: (a) Pre-filing credit counseling and (b) post-filing debtor education instructional course.
- 7. Limited Power of Attorney. Client agrees that the signature on this contract also grants Firm a limited power of attorney to affix its signature to any authorization forms required to (a) obtain tax information from any third party tax preparer, accountant, state or federal taxing authorities or any other party in possession of any type of tax information/returns related to Client, including, but not limited to copies of Client's tax returns and/or transcripts, and (b) obtain due diligence products from third parties including, but not limited to, real estate appraisals and/or comparative market analyses, title searches, asset searches, personal property valuations, and credit reports.
- 8. I/WE UNDERSTAND THAT THE INFORMATION DISCLOSED IN THE PETITION IS GIVEN UNDER PENALTY OF PERJURY AND THAT THE FEDERAL PENALTY FOR PERJURY MAY INCLUDE IMPRISONMENT AND HEAVY FINES.

FIRM: Upright Law LLC A Debt Relief Agency

Client: Ilyn Much For Firm: /s/Dave Gallagher

CLIENT(S):

Print: Dave Gallagher

United States Bankruptcy CourtNorthern District of Illinois

Not then District of Initions					
In re	Iyanna C Harris Lincoln		Case No.		
		Debtor(s)	Chapter	7	
	VEI	RIFICATION OF CREDITOR MAT	RIX		
		Number of Cre	editors: _	25	
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of creditors	is true and	correct to the best of my	
Date:	May 15, 2018	/s/ Iyanna C Harris Lincoln Iyanna C Harris Lincoln Signature of Debtor			

Associated Radiologits of Joliet 1200 Maple Rd, Joliet, IL 60432

Athletico 3454 S Halsted St, Chicago, IL 60608

Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Cda/Pontiac Attn: Bankruptcy Po Box 213, 415 E Main Street Streator, IL 61364

Chase Card Services Correspondence Dept Po Box 15298 Wilmington, DE 19850

Citicard General Correspondence Po Box 6500 Sioux Falls, SD 57117

Creditors Discount and Audit 415 E Main St, Streator, IL 61364

EM Strategies LTD PO BOX 487 Bedford Park, IL 60499

EM Strategies LTD PO BOX 487 Bedford Park, IL 60499 Enterprise Rent a Car DAMAGE Recovery Unit BOB PO BOX 801988 Kansas City, MO 64180

Georgia Natural Gas PO BOX 105445 Palm Beach, FL 33480

Iq Data International 1010se Everett Mall Way Everett, WA 98208

Kohls/Capital One Kohls Credit Po Box 3120 Milwaukee, WI 53201

Marietta power 675 North Marietta Marietta, GA 30060

Presence Health 62397 Collections Center Drive Chicago, IL 60693

Quantaom Radiology PO BOX 3157 Indianapolis, IN 46206

Rush Copley PO BOX 352 Aurora, IL 60507

Silver Cross Hospital 1900 Silver Cross Blvd New Lenox, IL 60451

State Collection Services Inc. PO BOX 6250 Madison, WI 53716

Target Card Services Mail Stop NCB-0461 Minneapolis, MN 55440

The Bortolazzo Gruop LLC PO BOX 277234 Atlanta, GA 30384

Us Dept of Ed Attn: Bankruptcy 2401 International Lane Madison, WI 53704

Verizon Attn: Wireless Bankrupty Admin 500 Technology Dr Ste 500 Weldon Springs, MO 63304

Wellstar Health System PO BOX 42625 Atlanta, GA 30374